

**LTS PLANNING COMMITTEE
COP VARIANCE REQUEST**

Case Manager: Yer Yang **Date:** 8/23/16

FUND COP SERVICES FOR PARTICIPANT RECEIVING RECUPERATIVE SERVICES IN AN INSTITUTION (UP TO 90 DAYS).

The purpose of this variance is to maintain a participant's support network during relatively brief institutional stays. No variance is needed for recuperative stays of 30 days or less. When a recuperative stay exceeds 30 days a variance is necessary to allow the use of COP funds to continue to pay for noninstitutional community service expenses for up to 90 days for current COP recipients.

1. INSTITUTION NAME: Middleton Village Nursing and Rehab Center

2. EXPECTED DURATION: Will return to the community before the 90 days after rehab.

3. PARTICIPANT INFORMATION

- Male ☐ Female ☒ Age 56 Time on COP/Waiver programs December 2000 Protective Placement N/A
- Current living arrangement: X Home
- **Health & medical problems (please use non-medical terms):** This client has the following medical conditions: stroke, chronic head ache, high blood pressure, high cholesterol, fatigue, severe spasms in legs, urinary incontinence, and recurrent urinary tract infection (UTI). She is paralyzed on one side of her body as a result of a stroke about 15 years ago and uses a power wheelchair for mobility. She experiences severe spasms in her legs and unable to bend her legs to assist with pivot transfers.
- **Situation requiring rehabilitation and desired outcomes:** She was admitted to the hospital on July 5th 2016 for urinary tract infection (UTI) and weakness due to not being able to move around and not being able to do the regular range of motion exercise as recommended by her doctor. She was transferred to Middleton Village Rehab Center on July 8th 2016 for additional rehab to improve her strength and ability to transfer with one person's assistance before she can return to the community. It is expected that she will continue to do pivot transfer with one person's assistance. If she develops difficulty with transfers, a mechanical lift such as an EZ Stand or Hoyer Lift will be obtained. This client will not be returning to her own apartment because her health and cognition have gradually declined to a point where she can no longer manage and direct her own care plan independently and safely. Her care needs have gradually increased and needs one-on-one care and supervision 24 hours a day 7 days a week. She does not have natural support or emergency back-up care support in place. She has not been able to respond to emergency or crisis situations. The Community Integration Program II (CIP II) Staff feels that it will not be a healthy and safe plan to discharge this client back to her own apartment. The goal is to find an appropriate supported or assisted living arrangement for this client before she can be discharged back to live safely and independently in the community. CLA CIP II Program will continue to provide case management services with appropriate health care service providers, Middleton Village Rehab Center Staff, and this client for up to 90 days from the above hospital admission date.
- **Services to be funded during rehabilitation:** Case Management services ☒ for up to 90 days from the above hospital admission date.

LTS Committee action: Chair approval date _____; Full committee approval date _____;

Non approval date _____; Reason _____

Consumer Name: _____

